

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	MTB	954	5/5/01
RESPONSE FORMALITY REVIEW	SL	809	7-13-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	3-14-02
2	10-20-02
3	9-25-03
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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